

Division of Laboratory Services 630 Hart Lane Nashville, TN 37216 615-262-6300

https://www.tn.gov/health/health-program-areas/lab.html

Disease/Agent Suspected or Test Requested:

Streptococcus pyogenes, invasive or toxin producing

Provider Requirements	Isolate submission is REQUIRED for laboratories.
Acceptable Specimen Sources/Type(s) for Submission	Pure culture isolate from normally sterile sites, necrotizing fasciitis, wound cultures.
TDH Requisition Form Number	PH-4182
Media Requirements	Non-selective media slants such as Trypticase Soy, Blood, or Chocolate agar.
Special Instructions	None
Shipping Instructions	Ship in ambient temperature. Do not send refrigerated or frozen.
Laboratory Section Performing Testing	Bacteriology
Lab Location(s) Performing Test	Nashville

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).